



Bureau of TennCare

Policy Manual

Policy No: CON 06-001 (rev 1)	
Subject: Minimum Requirements for Provider Directories	
Approval: <i>D. J. Bell</i>	Date: 8/28/2008

POLICY AND PURPOSE:

The Bureau of TennCare has received questions from MCCs about what provider demographics information is required in provider directories for enrollees. This Policy Statement addresses the minimum requirements along with some guidelines for submitting the provider directory to the TennCare Marketing Coordinator. This Policy Statement supersedes TSOP #37A.

DISCUSSION:

An "x" in a column on the grid below indicates which information is required in the provider directory for enrollees. MCCs can publish additional information if desired. As a reminder, all information being provided to enrollees must be presented at or below the 6th grade reading level [as stated in the TennCare/MCO CRA, Section 2-5 and Section 2.17 of the TennCare/Middle Tennessee CRA].

Provider Type	Name	Address	Phone Number	Open/ Closed	Foreign Language [if available]	Office Hours
PCP	X	X	X	X	X	X
Specialist	X				X	
Home Health	X					
Home Infusion	X					
Hospice	X					
DME	X					
Laboratory	X					
Pros./Orthotics	X					
MH/SA	X					
Pharmacy	X	X	X			
Facility	X					
Dentist	X	X	X			
Vision	X	X	X			

The MCC may choose to include additional information [e.g., OB/GYN address & phone number] at its discretion.

TennCare Provider Directory Verification Record Layout

Enrollee provider directories, and any revisions thereto, shall be submitted to the TennCare Marketing Coordinator for approval prior to distribution to enrollees. Each submission shall include a paper and an electronic copy. The text of the directory shall be in Microsoft Word. The provider information used to populate the enrollee provider directory shall be submitted as a TXT file and be produced using the same exact process as the actual enrollee provider directory. Below is the file layout to be used when an MCO submits its Provider Directory information; this file contains selected data elements from the current monthly TennCare Provider Enrollment file:

TennCare Provider Directories Record Layout					
Fieldname	Type	Length	Position Start	Position End	Comments
Detail Record					
BUSINESS-NAME	Char	29	1	29	The name of the Business or group for non-individual providers. NOTE: This field is a re-define of bytes 1-29 which are used for individual providers as defined below.
PROV-LASTNAME	Char	13	1	13	Last name of individual provider with a space for surname distinction such as Jr., Sr, II etc. for individuals.
PROV-FIRSTNAME	Char	11	14	24	First name of individual provider.
PROV-MIDDLE-INITIAL	Char	1	25	25	Middle initial of individual provider.
PROV-TITLE	Char	4	26	29	Provider type MD, RN, LPN, etc. Must match Dept. of Health.
SVR-ADDR-LN1	Char	30	30	59	Provider service location for specialty/taxonomy indicated.
SVR-ADDR-LN2	Char	20	60	79	Provider service location for specialty/taxonomy indicated.
SVR-ADDR-CITY	Char	20	80	99	Provider service location for specialty/taxonomy indicated.
SVR-ADDR-STATE	Char	2	100	101	Provider service location for specialty/taxonomy indicated.
SVR-ADDR-ZIP	Num	9	102	110	Provider service location for specialty/taxonomy indicated.
SVR-PHONE-NUMBER	Num	10	111	120	Phone number for this location.
TAXONOMY	Char	10	121	130	Taxonomy used to determine specialty code when NPI is present.
SPECIALTY-CODE	Char	3	131	133	Must use current list of valid specialty codes.
PROVIDER-TYPE	Char	2	134	135	Must use current list of valid provider types.
TENNCARE-ID	Char	15	136	150	Provider identification number assigned by the MCC. This number must be unique for each provider reported to TennCare and associated with no more than 1 NPI.
MCC	Num	3	151	153	MCC identification number assigned by TennCare.
PROV-PRENATAL	Char	1	154	154	Provider provides prenatal care. Values 'Y', 'N'.

NEW-PAT	Char	1	155	155	Provider accepts new patients. Values 'Y', 'N'.
BHO-PROVIDER-SERVICE-CODE	Char	2	156	157	See attached document with listing of codes. Required on Behavioral Health Providers for MCO's 031, 032, 081 and 082.
OFFICE HOURS1	Char	25	158	182	
OFFICE HOURS2	Char	25	183	207	
OFFICE HOURS3	Char	25	208	232	
OFFICE HOURS4	Char	25	233	257	
OFFICE HOURS5	Char	25	258	282	
OFFICE HOURS6	Char	25	283	307	
OFFICE HOURS7	Char	25	308	332	
FOREIGN-LANGUAGE1	Char	15	333	347	
FOREIGN-LANGUAGE2	Char	15	348	362	
FOREIGN-LANGUAGE3	Char	15	363	377	
FOREIGN-LANGUAGE4	Char	15	378	392	
FOREIGN-LANGUAGE5	Char	15	393	407	

OFFICES OF PRIMARY RESPONSIBILITY:

TennCare Office of Networks

TennCare Marketing Coordinator

REFERENCES:

TennCare/MCO CRA Section 2-5

TennCare/Middle TN CRA Section 2-17

DAS